PTO/SB/06 (12-04)

	Substitute for Form PTO-875 Effective December						Apple	deys a valid	2006. CIMB DEC ENT OF COME CIMB control of CAM Number
APF	LICATION A		• •						7-0
	(Colum	n 1)	(Column 2)	SA	IALL ENTI	TY	OR	O1 SM	THER THAN IALL ENTITY
FOR	NUMBER	FILED	NUMBER EXTRA		a.				LILLIA 12
7 CFR 1 16(0). (b). or (c))	NA		N/A ·	RATE		E (I)		RATE	FEE.
ARCH FEE CORN 1 16(N. (V. ox (my))	·· N/A		N/A			0.00		NIA	300.0
CAMINATION FEE	N/A	<del></del>		- NA	\$2	50		NIA	\$500
TAL CLAIMS			'N/A	HVA	\$1	00		, N/A	\$200
OFR 1 16(1) DEPENDENT CLAIMS	m	inus 20 c '	-	X\$ 25	•		OR	X\$50	
OFR 1 16(h))		• C sum		X100				X200	
PUCATION SIZE	sheets of man	ation and dra	wings exceed 100 ation size fee due	7			ŀ		-
E CFR 1 16(4))	10 4430 13125	ി0 ( ജനാല് ഹദ	itul for anah	11			- 1		
~ "   10(4))	aggiuonal 50 :	sheets or trac	tion thereof Ca.	11	1	1	l		
Tip s pension	U.S.C. 41(	all I (G) and	37 CFR 1.16(s).			]	1		
LTIPLE DEPENDENT C				+180=			1	+360=	1
the difference in column	1 is less then zero	o, enter "O" in c	olumn 2.	TOTAL			L		
APPLICAT	ION AS AMEI	אחרה הי	O.T:	10176	<u> </u>			TOTAL	
	·	NUEU - PA	RIII					••	
-1-CO (CO)	uma 1)	(Colum	n 2) (Column 3)	SMAI	L ENTITY	c	)R	OTHE	R THAN
	AIMS				CCHILL				
		HIGHE			7			SMAL	LENTITY
REM AF	AINING TER	HIGHE: NUMBE PREVIOU	R PRESENT	RATE (\$)	ADDI		Γ	RATE (\$)	LENTITY
REM AF AMEN	AINING TER IDMENT	PREVIOU PAID FO	R PRESENT		T	4	$\int$	_	YTITUB L HOOL
Total CITCER LINE	AINING TER	PREVIOU PAID FO	R PRESENT SLY EXTRA		ADDA	4		_	LENTITY ADOI-
Total OTCER (LIGH)	AINING TER IDMENT	PREVIOU PAID FO	R PRESENT SLY EXTRA	RATE (\$)	ADDA	4		RATE (\$)	YTITUB L HOOL
Total OTCER (LIGH)	AINING TER IDMENT	PREVIOU PAID FO	R PRESENT SLY EXTRA	RATE (\$)	ADDA	4	1	_	YTITUB L HOOL
Total OTCFR (LIGH)  Application Size Fee (3)	AINING TER IDMENT  Minu  CFR 1.16(s))	NUMBE PREVIOU PAID FC	PRESENT SLY EXTRA	X100 =	ADDA		×	RATE (\$)	YTITUB L HOOL
Total  OTOFR (LIGH)  Application Size Fee (3)	AINING TER IDMENT  Minu  CFR 1.16(s))	NUMBE PREVIOU PAID FC	PRESENT SLY EXTRA	X100 = +180=	ADDA		×	RATE (\$)	YTITUB L HOOL
Total OTCFR (Jan)  Application Size Fee (3)	AINING TER IDMENT  Minu  CFR 1.16(s))	NUMBE PREVIOU PAID FC	PRESENT SLY EXTRA	X100 =	ADDA	OR	X + P	RATE (\$) 200 = 360=	YTITUB L HOOL
Total (JICER LIGH)  Application Size Fee (3)  FIRST PRESENTATION OF	AINING TER IDMENT  Minu  CFR 1.16(s))  MULTIPLE DEPEN	NUMBE PREVIOU PAID FC	PRESENT SLY EXTRA PR	X100 = +180=	ADDA	OR	X + P	RATE (\$) 200 =	YTITUB L HOOL
Total  ATOTAL  (DICTRILIAN)  Application Size Fee (3)  FIRST PRESENTATION OF	AINING TER IDMENT  CER 1.16(s))  MULTIPLE DEPEN  IN 1)  MS	PAID FC S  COlumn  HIGHEST	PRESENT EXTRA PR SLY ST PRESENT EXTRA  37 CFR 1.16(0)	X100 = +180= TOTAL ADO'L FEE	ADDA	OR	X + P	RATE (\$) 200 = 360=	YTITUB L HOOL
Total (OTCER LIGH)  APPLICATION  Application Size Fee (3)  FIRST PRESENTATION OF COLUMN  COLUMN  REMAI	AINING TER (DMENT Minu.  CFR 1.16(s))  MULTIPLE DEPEN  MS  NING  ER	Column HIGHEST PREVIOUS	PRESENT EXTRA  PRESENT EXTRA  PRESENT EXTRA  PRESENT EXTRA	X100 = +180=	ADDI-	OR	X + P &	200 = 360= TAL D'L FEE	ADOI- TIONAL FEE (1)
APPLICATION OF COLUMN AFTI AMEND	AINING TER (DMENT Minu.  CFR 1.16(s))  MULTIPLE DEPEN  MING ER  MENT	Column HIGHEST PREVIOUS PAID FOR	PRESENT EXTRA  PRESENT EXTRA  PRESENT EXTRA  PRESENT EXTRA	X100 = +180= TOTAL ADO'L FEE	ADDITIONS FEE (	OR	X + P &	RATE (\$) 200 = 360=	ADOI- TIONAL
Total (OTCER LIGH)  APPLICATION  Application Size Fee (3)  FIRST PRESENTATION OF  COLUMN  REMAI AFT  AMEND  Total Total Total Total Total Total Total	AINING TER IDMENT Minus  CER 1.16(s))  MULTIPLE DEPEN  MING FER MENT  Minus	Column Highest NUMBE PREVIOU PAID FC  (Column Highest NUMBE PREVIOUSE PAID FOR	PRESENT EXTRA  PRESENT EXTRA  PRESENT EXTRA  PRESENT EXTRA	X100 = +180= TOTAL ADO'L FEE	ADDI- TIONAL FEE (1)	OR OR	+ 10 AD	200 = 360= TAL D'L FEE	ADOI-
Total OTCER LIGHT  APPLICATION  Application Size Fee (3)  FIRST PRESENTATION OF  COLUMN  CLA REMAL AFT AMENO  Total	AINING TER (DMENT  CFR 1.16(s))  MULTIPLE DEPEN  MING ER MENT  Minus  Minus	Column HIGHEST PREVIOUS PAID FOR	PRESENT EXTRA  PRESENT EXTRA  PRESENT EXTRA  PRESENT EXTRA	X100 =  +180= TOTAL ADO'L FEE  RATE (\$)  X\$ 25 =	ADDI- TIONAL FEE (1)	OR OR	F. XS:	200 = 360= TAL D'L FEE	ADOI- TIONAL
Total (OTCER LIGHT)  Application Size Fee (OTCER)  (Column  CLA  REMA  AFT  AMENO  Total  Tot	AINING TER IDMENT Minus  CER 1.16(s))  MULTIPLE DEPEN  MINUS  Minus  CER 1.16(s))	(Column Highest NUMBER PREVIOUS PAID FC  (Column Highest NUMBER PREVIOUS PAID FOR	PRESENT EXTRA  37 CFR 1.16(0)  2) (Column 3)  PRESENT EXTRA	X100 =  +180= TOTAL ADD'L FEE	ADDI- TIONAL FEE (1)	OR OR	F. XS:	200 = 360= TAL D'L FEE	ADOI- TIONAL
Total (Cotum  CCAL  AFTI  AMENO	AINING TER IDMENT Minus  CER 1.16(s))  MULTIPLE DEPEN  MINUS  Minus  CER 1.16(s))	(Column Highest NUMBER PREVIOUS PAID FC  (Column Highest NUMBER PREVIOUS PAID FOR	PRESENT EXTRA  37 CFR 1.16(0)  2) (Column 3)  PRESENT EXTRA	X100 = +180= TOTAL ADO'L FEE RATE (5)  X\$ 25 = X100 =	ADDI- TIONAL FEE (1)	OR OR OR	# TO AD:	200 = 360= TAL D'L FEE	ADOI- TIONAL
Total (37 CFR 1.18(1))  Application Size Fee (37 CColumn	AINING TER IDMENT Minus  CER 1.16(s))  MULTIPLE DEPEN  MINUS  Minus  CER 1.16(s))	(Column Highest NUMBER PREVIOUS PAID FC  (Column Highest NUMBER PREVIOUS PAID FOR	PRESENT EXTRA  37 CFR 1.16(0)  2) (Column 3)  PRESENT EXTRA	X100 =  +180= TOTAL ADO'L FEE  RATE (\$)  X\$ 25 =	ADDI- TIONAL FEE (1)	OR OR	# TO AD:	200 = 360= TAL D'L FEE	ADOI- TIONAL

The Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1. ts collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the IPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. iPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, fulfing gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any commente the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent 1 Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS DRESS, SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450.